

Overview

Mission Statement

Our goal is the rapid translation of innovative scientific discoveries into therapeutic products that hold the real hope for preventing and curing cancer and other diseases.

The mission of the Biopharmaceutical Development Program (BDP) is to manage the technical operation of the NCI's Biological Resource Branch (BRB). The BDP assesses research and development biopharmaceutical clinical products. The BDP interprets the current regulations and guidelines to produce "research grade" as well as "clinical grade" materials. The purpose is to explore "proof of principle" of novel therapeutic concepts, as well as early clinical trials for cancer and other diseases. The BDP performs technology transfer of developed products and processes to meet BRB initiatives.

BDP manufactures high-quality, laboratory-grade material to support preclinical development for selected innovative projects. The NCI selects and prioritizes candidate projects. BDP provides feasibility analyses and cost estimates that are used in the selection. We undertake a portfolio of projects based on the following criteria:

Program Approach

1. Concepts are selected for novelty and innovation over derivatives of existing approaches.
2. Many projects have been previously considered by Pharma and declined due to uncertain technology, regulatory hurdles, or small markets.
3. Clinical production is focused on meeting requirements for initial proof-of-concept trials, NOT final product requirements for commercial development.
4. Approximately 1/10 – 1/20 clinical projects may eventually be licensed.
5. Desired size of program is based on assumptions #1-4 (above), i.e., 10-20+ projects per year to clinic.
6. Intellectual Property to be retained by Project Originator(s).

Where Does the Program Get Projects?

1. Peer-reviewed extramural research
2. Special competitions:
 - NCI Rapid Access to Intervention Development (RAID) Program
 - NIDDK RAID for Type 1 Diabetes
 - Inter-Institute Program (IIP) for AIDS Projects
 - National Cooperative Drug Discovery Groups
3. Intramural NCI research
4. Other government programs (NIAID, NIDDK, USAMRIID)
5. Commercial collaborations with Government
6. Work for others

Program Capabilities

Mammalian Cell Culture

- 100-L and 1000-L Bioreactors
- CalliGen Plus® Bioreactors
- Wave Bioreactors
- Virus Production
- Hollow Fiber Bioreactors

Bacterial Fermentation

- New Brunswick 10-L and 20-L fermentation systems with BioCommand software control and on-line monitoring (Lactel) for process development studies
- 80-L NBS and 100-L's Braun fermenters with (Clean in Place) CIP for cGMP fermentation operations with recombinant microorganisms
- 30-, 300-, 3000-gallon fermentation vessels for natural product fermentations
- Gaulin and Niro Homogenizers
- Continuous desludging centrifuge (Carr) processing tanks, crossflow filtration set up, evaporators

Protein Purification/Fill-Finish

- AKTA Explorers (Pharmacia) for purification development
- VirTis research freeze dryer
- Millipore and Pharmacia-automated purification skids for cGMP operation
- BPG columns of different sizes for cGMP operations
- Validated automated (3-ml and 5-ml) filling system (Monoblock)
- Automated labeling system

Selected Outsourcing

- Fill/Lyophilize: Formatech (Andover, MA)
- Adenoviral product for gene therapy: Q-1 Biotech (Glasgow, Scotland)
- Cell based vaccines: Bioreliance (Rockville, MD)

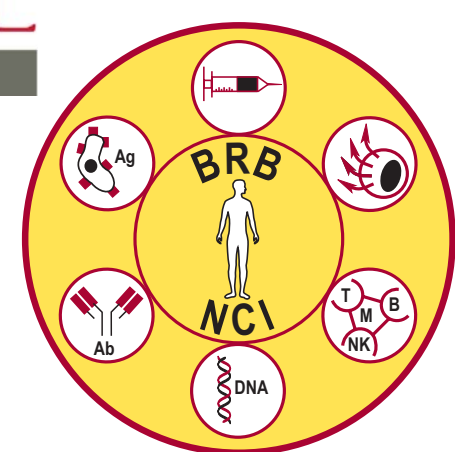
Analytical Development

- Cell based assays: cell based binding ELISAs, cell proliferation assays, FACS based assays
- Physico-chemical assays: HPLC with triple detector, cIEF, static and dynamic light scattering, circular dichroism
- BioCore based assays
- Transfection assays

Biopharmaceutical Projects by Biological Resources Branch (1987-Present)

PROJECTS	AFFILIATION	PROJECTS	AFFILIATION
Recombinant Protein Vaccines		Monoclonal Antibodies (cont'd)	
Mutant K-Ras Vaccines	NCI	hucc49-Delta-CH2 Anti-Tag 72	NCI
T-1V Vaccine (Plague)	NIAID	hok72.1 (A1a, A1a)	NIDDK
rSEB Vaccine	USAMRIID	MRK-16	
PA-83 (rPA) Vaccine (Anthrax)	USAMRIID/NIAID	Mu B3	NCI
hsp110 Melanoma Vaccine	Roswell Park Cancer Institute, NY	Murine 225 Production Anti-EGFR	Univ. of California, San Diego
RTV-1 Protein	Baylor College of Medicine	Murine 426 IgA/Anti-Transferrin Receptor	Univ. of Arizona Health Science
Viral Vaccines		Murine 528 Anti-EGFR	Univ. of California, San Diego
VEE Vaccine	USAMRIID/JVAP/Dynport	Murine Anti-Tac Anti-IL-2R	NCI
FGF Adenovirus Vaccine	Henry Ford Health System	Murine 11-1F4	Univ. of Tennessee
AFP and GMCSF plasmids (2) and AFP Adenovirus Vaccines	Univ. of California, LA	OVB3 Anti-Ovarian Antibody	NCI
TMVA-hvp53	City of Hope Medical Center	RF4	Univ. of Texas
Ad GMCSF-CAIX	David Geffen School of Medicine	V44-24 IgM216	Stanford Univ. School of Medicine
Plasmid Vaccines		PB3 (LEC-NH576)	Univ. of Southern California
PNGV4pNGVLA4a - Sig E7	Johns Hopkins Univ.	IL-2 FcIL-15 Fc	NIDDK
(delta)HSP70		Natural Products	
NGVL4a-CRT E7 Vaccine	Johns Hopkins Univ.	Wortmannin	Arizona Cancer Center
pING-TYRP2 Plasmid Vaccine	Memorial Sloan-Kettering	Fumagillin	NCDDG
pWRG 1644 DNA Plasmid Vaccine	Univ. of Wisconsin	Galdanamyacin	NCDDG
Vaccine - Cellular Products		Endotoxin	NCDDG
Paraneoplastic Tumor Cell Vaccines	Johns Hopkins Univ.	Immunotoxins	
EBV Supernatant Vaccine	Johns Hopkins Univ.	MM1-4 dsFv-PE29	Duke Univ.
Master Cell/Working Cell Bank (Allogeneic Vaccine)	Johns Hopkins Univ.	BL-22 (dsFv RFB4-PE38) (Lymphoma)	NCI
Phase III/IIIa Vaccines (Lymphoma) NCI		ERB-38	NCI
Vaccine Peptides		LMB-2 (Anti-TAC Fv PE-38)	NCI
PADRE-OMV Vaccine	City of Hope Medical Center	HA-22 Immunolipid (Lymphoma)	NCI
3 Vaccine Peptides (Breast Cancer)	Johns Hopkins Univ.	RN321-RFB4 Onconase	NCI
HPV 16 - E7/MET-3-THR	NCI	Recombinant Proteins	
pCULIS 3-148M Peptide	NCI	Hu IL-7	Boston Univ. Hospital
PR103 (p53-194 His) Vaccine	NCI	Recombinant Wolinella Asparaginase	Indiana Univ.
PR24 (ras-12 Arg)	NCI	Cyanovirin HIV Therapy	NCI
PR26(p53-282-T) Peptide	NCI	F-5 Cys Anti-Her2/neu scFv AB	Univ. of California, San Francisco
PR34 Peptide	NCI	Targeted Liposome	
PR88(p53-196Pro Peptide	NCI	IL-4 Receritification	NCI
PR92 (p53-144Arg)	NCI	IL-6 Receritification	Johns Hopkins Univ.
PR95 (p53-169Pro)	NCI	IL-2 Receritification	NCI/Extramural
V166A-V4L14	NCI	IL-15	NCI
CAP-1 Peptide Vaccine	NCI	Oligonucleotides	
MART-1 Peptide Vaccine	NCI	KSR Antisense Oligonucleotide	Memorial Sloan-Kettering
HPV E7 Peptide Vaccine	NCI	c-myc Oligodeoxynucleotide	Univ. of Pennsylvania School of Medicine
Multiple Patient-Specific Peptide Vaccines	NCI	Oncolytic Viruses	
Kleinf Peptide Vaccines	NCI	Polio virus Chimera (Brain Tumors)	Duke Univ.
Peptide Vaccine	Thomas Jefferson Univ.	Ad 3/5 Delta-24	Hallmark Univ.
Bradykinin Antagonist Peptide	Univ. of Colorado Cancer Center	Dalla-24 Adenovirus	M.D. Anderson
EP-1 Peptide		Oncolytic Virus Delta-24-RGD	Univ. of Alabama, Birmingham
PKFX Peptide		AdRGDGD-SSTR Oncolytic Virus	Univ. of Massachusetts General Hospital
Monoclonal Antibodies		Head & Neck Cancer	Harvard-Massachusetts General Hospital
11E-11 Rat Anti-murine IL-4	NCI	Herpes Vector Oncolytic Virus	Univ. of Alabama, Birmingham
1D12 Anti-hu IgM	NCI	AdRGDTS-SSTRK Oncolytic virus (Ovarian Cancer)	Univ. of Alabama, Birmingham
2A11 Anti-bombesin	NCI	Tissue-specific CRA4: Ad Cox-2/RGD (Pancreatic Cancer)	Univ. of Alabama, Birmingham
3 Antibodies, Bui2-Saporin	The Flavell Leukemia Research Unit	Ad-CC1-21	Univ. of California, Los Angeles
AK9129-Saporin, OKT10-Saporin	NCI	MY-NIS (Multiple Myeloma)	Mayo Clinic, Rochester, MN
6D9 Anti-ID	NCI	Ad-KD3	St. Louis Univ., St. Louis
7G7 Anti-IL-2 alpha R	NCI	Ad-TSTA-Sr39K (Prostate Cancer)	Univ. of California, Los Angeles
9-3 Anti CD22 (transplantation)	Naval Medical Research Laboratory	Cell Banks	
95-5-49 Anti-T cell	NCI	A549 Master Cell Bank	BDP Resource
95-6-22 Anti-T cell	NCI	Vaccinia Master/Virus Banks	BDP Resource
Anti-CD45 MAB	Vanderbilt Univ.	CHO Cell Bank	BDP Resource
Anti-CD54 Monoclonal Antibody	Univ. of Texas	MRC-5 Cells	BDP Resource
B72.3 Anti-Tag 72	Univ. of Alabama, Birmingham	NSO Cells	BDP Resource
BC8	Vanderbilt Univ.	VERO Cell Bank	BDP Resource
C-225 (Chemirization) Anti-EGFR	Univ. of California, San Diego	HEK293 Master Cell Bank	BDP Resource
Ch 14.18 Anti-GD2	Univ. of California, San Diego	K562 Cells	BDP Resource
CH E86 Anti-hu IgA	NCI	SAIC-Frederick, Inc.	SAIC-Frederick, Inc.
Ch R24 Anti-CD3	Memorial Sloan-Kettering	MVA Virus Bank	BDP Resource
Murine R24 Anti-GD3	Memorial Sloan-Kettering	T-165 Cells	BDP Resource
Murine E2.3 and A27.15	Univ. of Arizona Health Science	TF-1 Cells	BDP Resource
Anti-Transferrin Receptor	Univ. of Tennessee	U87-MG Cells	BDP Resource
Chimeric 11-1F4 Anti-ID (Leukemia)	Univ. of Alabama, Birmingham	DH5 Alpha E. Coli bank	BDP Resource
DB12 Anti-Colon Cancer	Univ. of Texas	E. Coli BL21AI	BDP Resource
HD37	NCI, Harvard Medical School	E. Coli BL21BRL	BDP Resource
HEF-1	NCI		
HCV 363	Univ. of Wisconsin		
Hu 14.18 IL-2 Fusion Protein	Univ. of Wisconsin		
Hu B3	NCI		
Hu B22.7	Univ. of California, Davis Cancer Center		
Hu Mik B2.1	NCI		

The projects that are bolded have been released for clinical use.
The italic projects have been released for toxicology.



Biopharmaceutical Development Program (BDP)

Bringing Projects from Laboratory Bench to Clinic: Development Challenges and Go/No-Go Decisions

George Mitra, Steve Giardina, Jianwei Zhu, Ray Harris, Jinhua Lu, and Gopalan Soman

SAIC-Frederick, Inc., National Cancer Institute at Frederick, Frederick, MD.



SAIC-Frederick, Inc.
A Subsidiary of Science Applications
International Corporation
Operations and Technical Support Contractor for
the National Cancer Institute at Frederick

Many Projects Require Substantial Attention at the Onset

Expression System Problems

- Errors in genetic sequence
- Extraneous genetic material
- Instability of genetic material
- Ampicillin selection pressure
- Lab-scale affinity purification only
- Protein solubility problems
- Low yield
- Poorly defined production system
- Inadequate purification schemes

Analytical Approaches

- Unvalidated or non-existent *in vitro* potency assay
- Lack of key reagents, e.g., antibodies to desired product
- Poor biochemical characterization

Regulatory and Safety

- Raw material qualification
- Inappropriate cell banks
- Difficult or unidentified toxicology systems
- Failed vendor qualification

Other

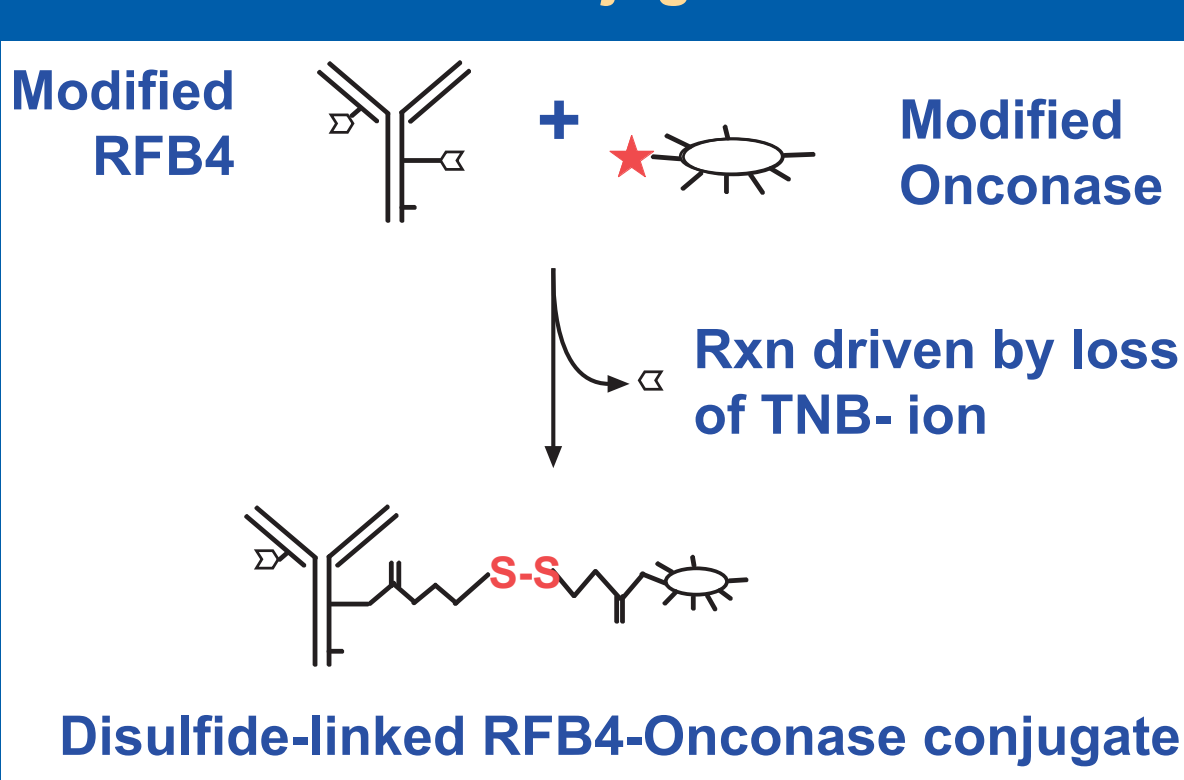
- Intellectual property concerns
- Delays in Material Transfer Agreements (MTAs)
- Contracting delays
- Lack of synchronization between funding mechanisms
- Basic data cannot be reproduced

Aggregation: Formulation Solution

What is RFB4-Onconase?

- RFB4: A large, 140 kDa IgG, antibody that targets a carcinoma-related surface antigen (CD 22).
- Onconase: A small, 12 kDa, naturally occurring RNA-digesting protein having low systemic toxicity.
- RFB4-Onconase: RFB4 covalently linked to Onconase to produce an antibody-targeted, anti-cancer therapeutic.

RFB4-Onconase Conjugation

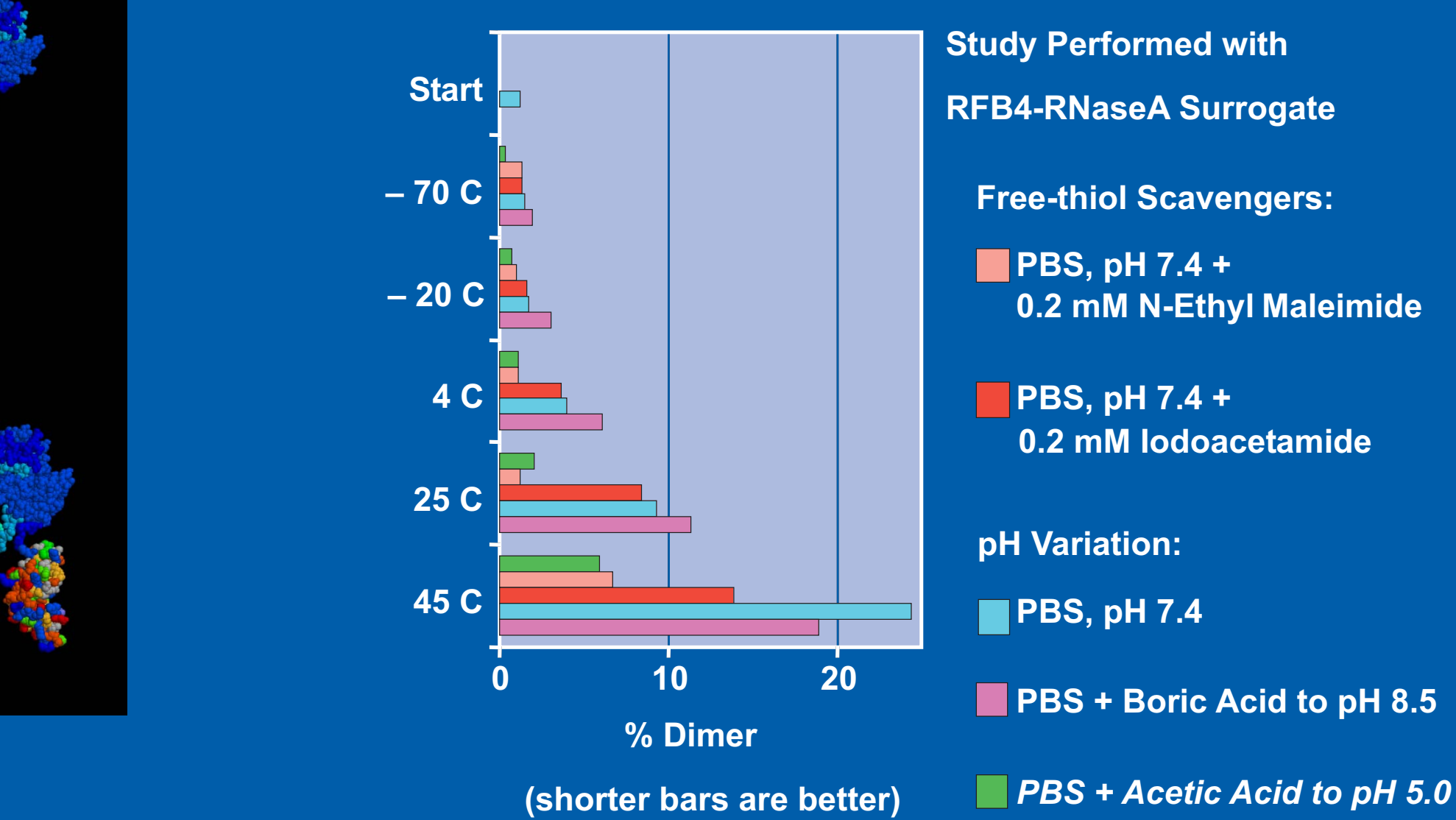


RFB4-Onconase Instability

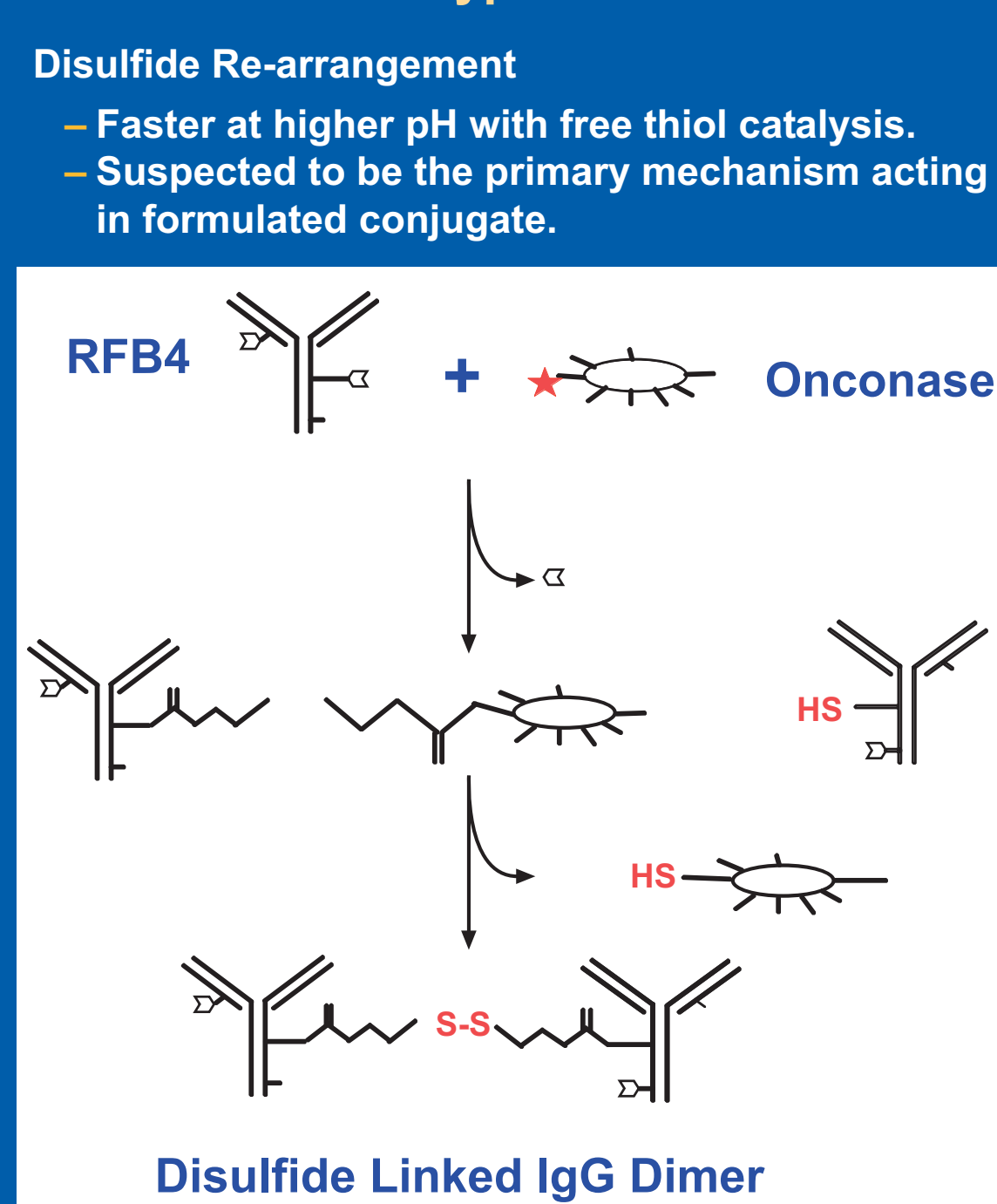
- RFB4-Onconase formulated to 1.5 mg/mL in PBS, pH 7.4.
- Stored at 2 to 8°C:
 - Within 24 hours, 8% dimer/multimer observed.
 - After 7 months, 38% dimer/multimer formed.
- Not acceptable for pre-clinical studies spanning several years.

- Other projects that experienced similar issues:
 - IgM
 - RFB-Ricin

Accelerated (4 day) Stability vs. Formulation



Disulfide Dimer Type II



Stability Study Summary

Dimer formation was faster at higher pH/ temp.

- RFB4-RNase solution stability was:
 - Unstable in PBS, pH 7.4
 - Modestly improved by IA
 - Significantly improved by NEM
 - Significantly improved when held at pH (5.0).
 - Was maximally stable when stored at -70°C.
- This information was used to re-design the RFB4-Onconase formulation buffer.

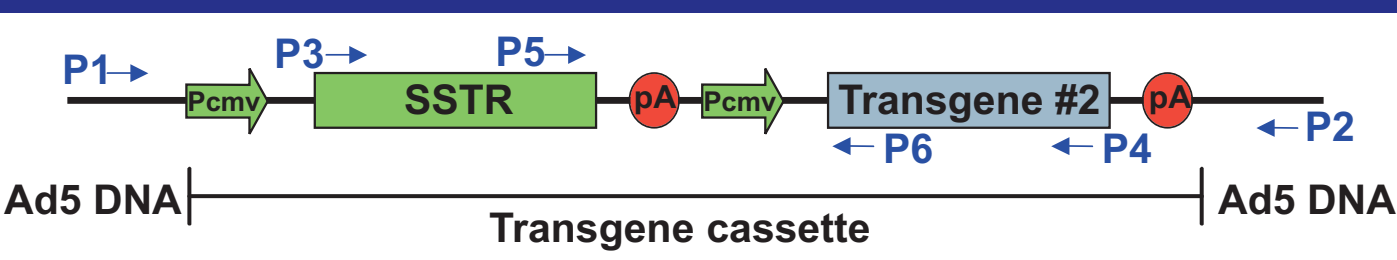
Virus Instability

Viruses Found to be Unstable

- AdRGDTKSSTR
- AdRGDCSSSTR
- AdCDSSTR

Diagnostic PCR Analysis of Adenovirus Vectors Containing a Dual Expression Cassette

- Investigators designed and constructed a dual transgene cassette incorporated into an Adenovirus vector.
- One gene (SSTR2-human somatostatin receptor subtype-2 gene) functions as an imaging tool.
- The other gene (variable) delivers the therapeutic payload.
- The molecular design of the dual expression cassette resulted in the tandem repeat of both the promoter (CMV) and polyA tail (SV40) that regulate expression of the two genes:



Observation During Molecular Characterization

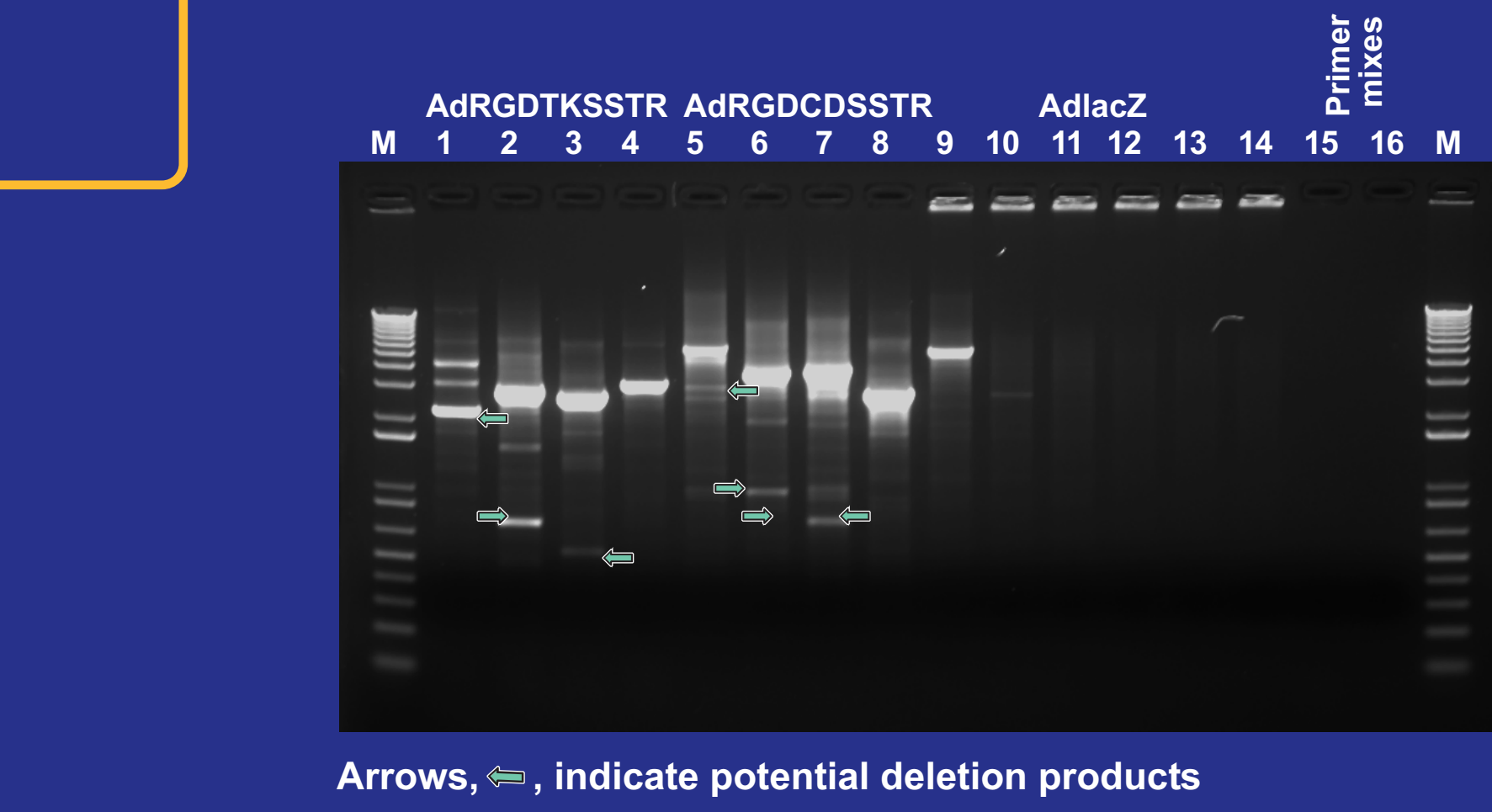
- Attempts to amplify the complete cassette (using primers P1 & P2) generated both full-length product and deletion products, suggesting the deletion of one or other gene from the cassette. No such deletion products were observed using a control adenovirus: AdLacZ, carrying one inserted gene.

- Diagnostic PCR analysis using internal gene specific primers (P3-P6) supported this observation (see Table of Expected and Observed Amplification Product Sizes).

PCR Amplification Product Sizes

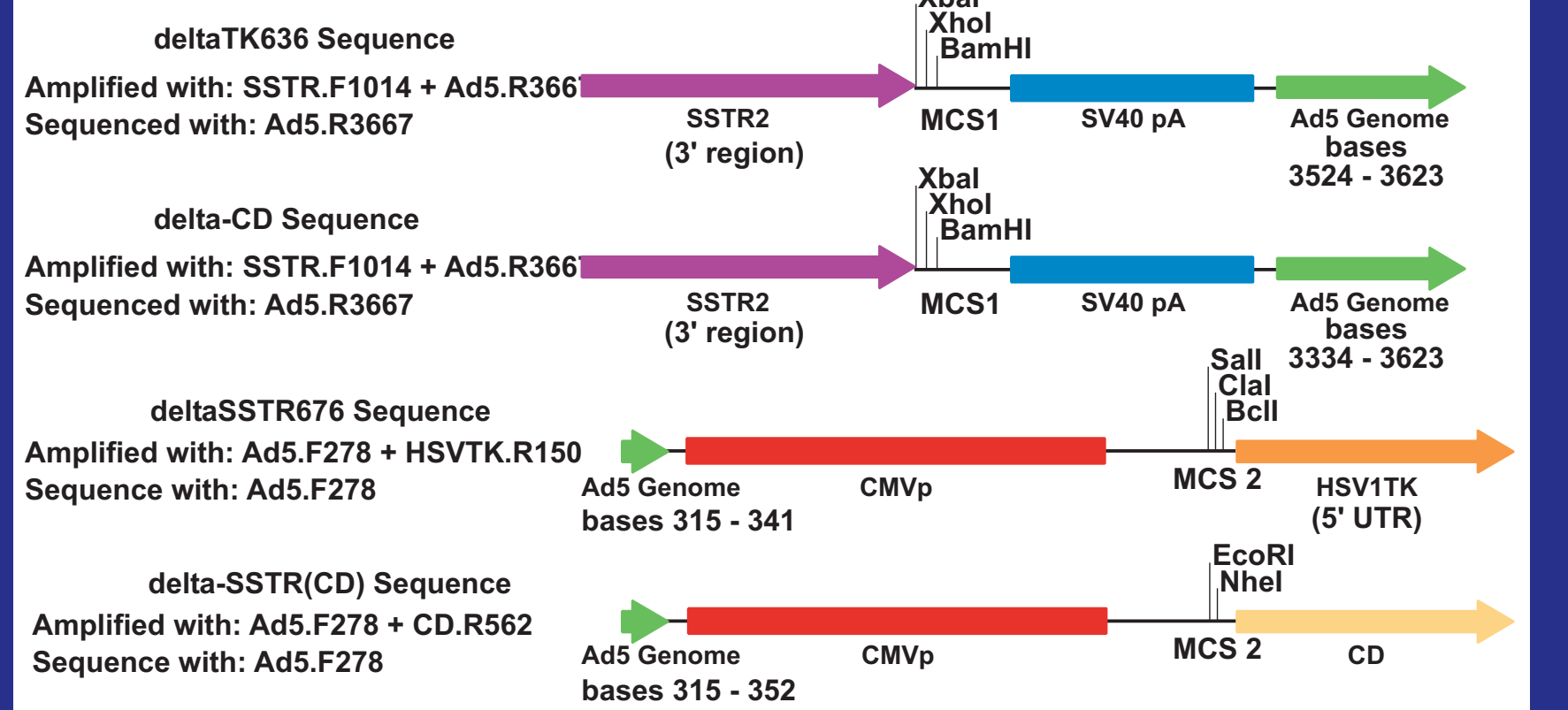
Rxn	Primers	Predicted (FL) (approx. kb)	Deletion (approx.kb)	Observed (approx. kb)
1	Ad5 F278 (P1) + Ad5 R3667 (P2)	4.1	2.2	4.1, (3.4), 2.2
2	Ad5 F278 (P1) + HSVTK R150 (P3)	2.6	0.67	2.7, 0.67
3	SSTR F1014 (P3) + Ad5 R3367 (P2)	2.6	0.63	2.6, 0.6
4	SSTR F778 (P3) + Ad5 R3367 (P2)	3.0	N/A	3.0
5	Ad5 F278 (P1) + Ad5 R3667 (P2)	4.1	2.2	5.5, 4.1, 3.0, 2.6
6	Ad5 F278 (P1) + CD R562 (P4)	3.0	1.1	3.4, 0.95
7	SSTR F1014 (P3) + Ad5 R3367 (P2)	2.6	0.6	3.5, 0.75
8	SSTR F778 (P3) + CD R562 (P4)	2.4	N/A	3.5, 0.75
9	Ad5 F278 (P1) + Ad5 R3667 (P2)	4.9	N/A	5

Gel Analysis of Amplification Products Observed



Further Molecular Characterization

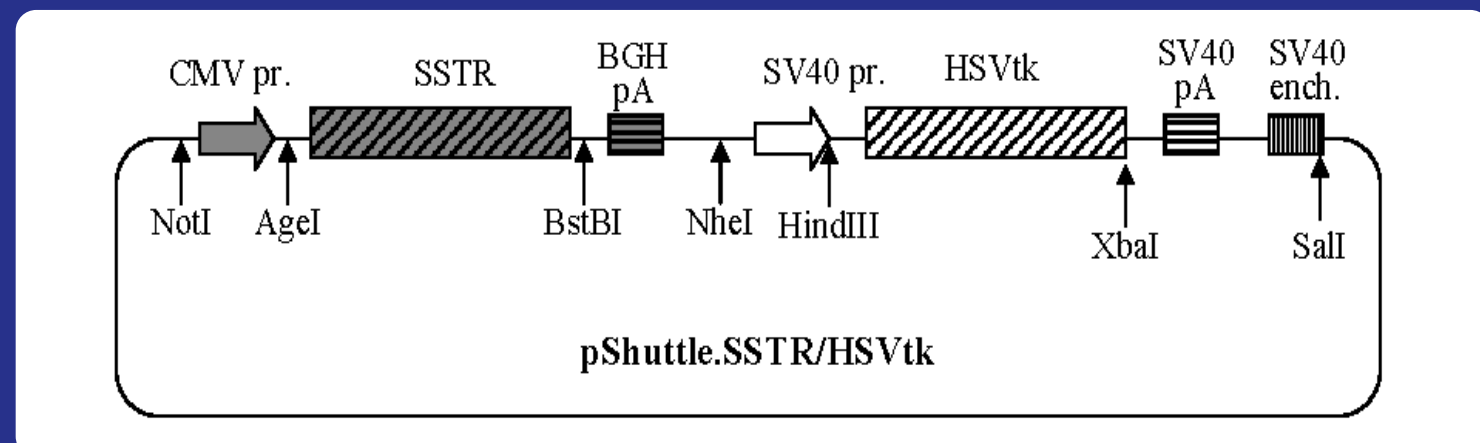
Potential deletion products (from the highlighted reactions) were isolated and sequence analysis confirmed the existence of products with complete deletion of one or other gene mostly likely caused by homologous recombination between the repeated genetic elements.



Corrective Action (ongoing)

- These deletion events lead to the production of genetically unstable adenovirus vectors that are unsuited for clinical development.

- Investigators have redesigned their dual expression cassette to place each gene under the control of unique genetic transcriptional elements, eliminating DNA sequence duplication, which should minimize the potential for recombination leading to genetic instability:



Undesirable Mutations and Safety Issues

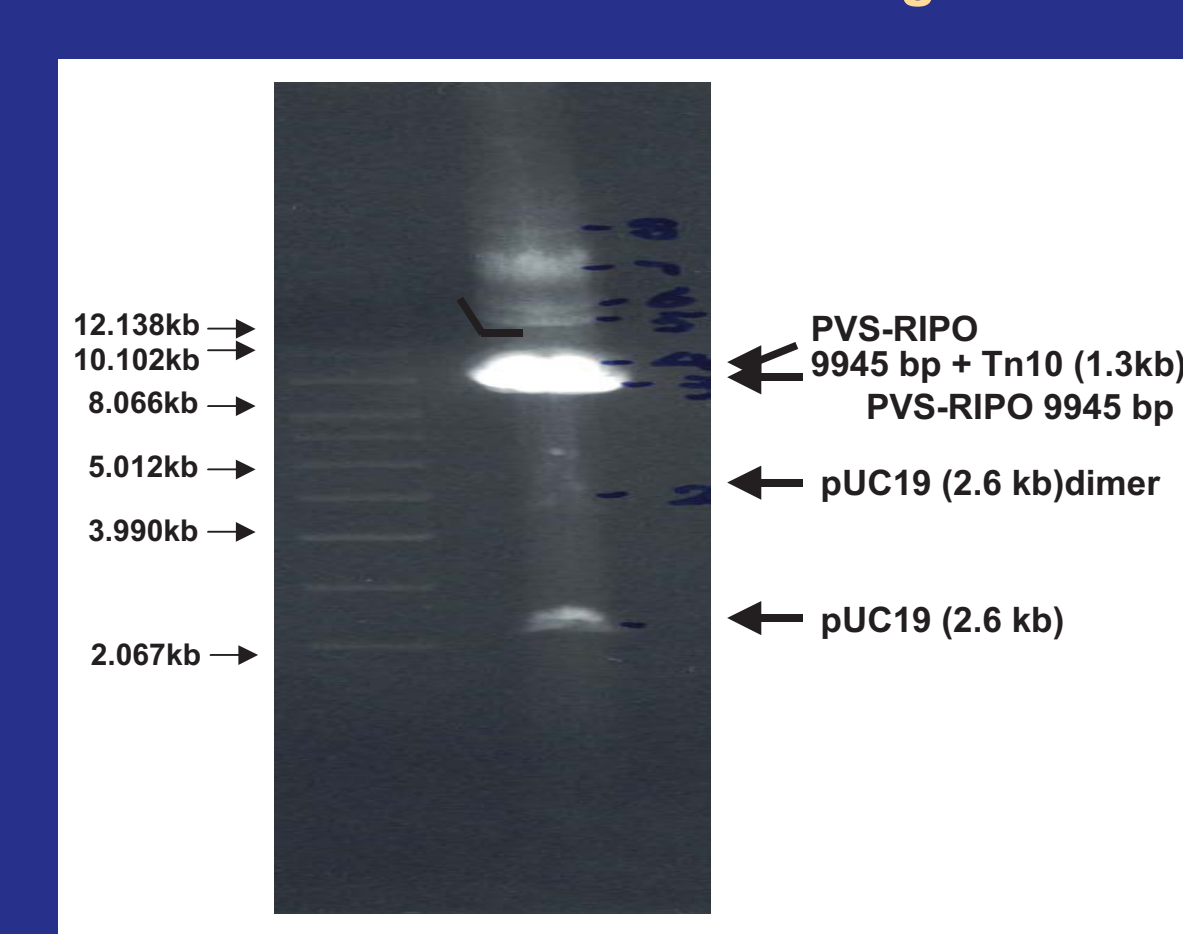
Product Development of PVS-RIPO: A Chimeric Poliovirus Vector for the Gene Therapy of Brain Tumors

Viral vectors have been extensively exploited for cancer gene therapy. Compared to DNA virus-based viral vectors, the development of RNA virus-based viral vectors poses unique challenges. The mutation rates in RNA viruses are about 1000-fold higher than that observed in DNA virus replication. Therefore, it is important to develop a process that ensures the safety and quality of RNA virus vectors.

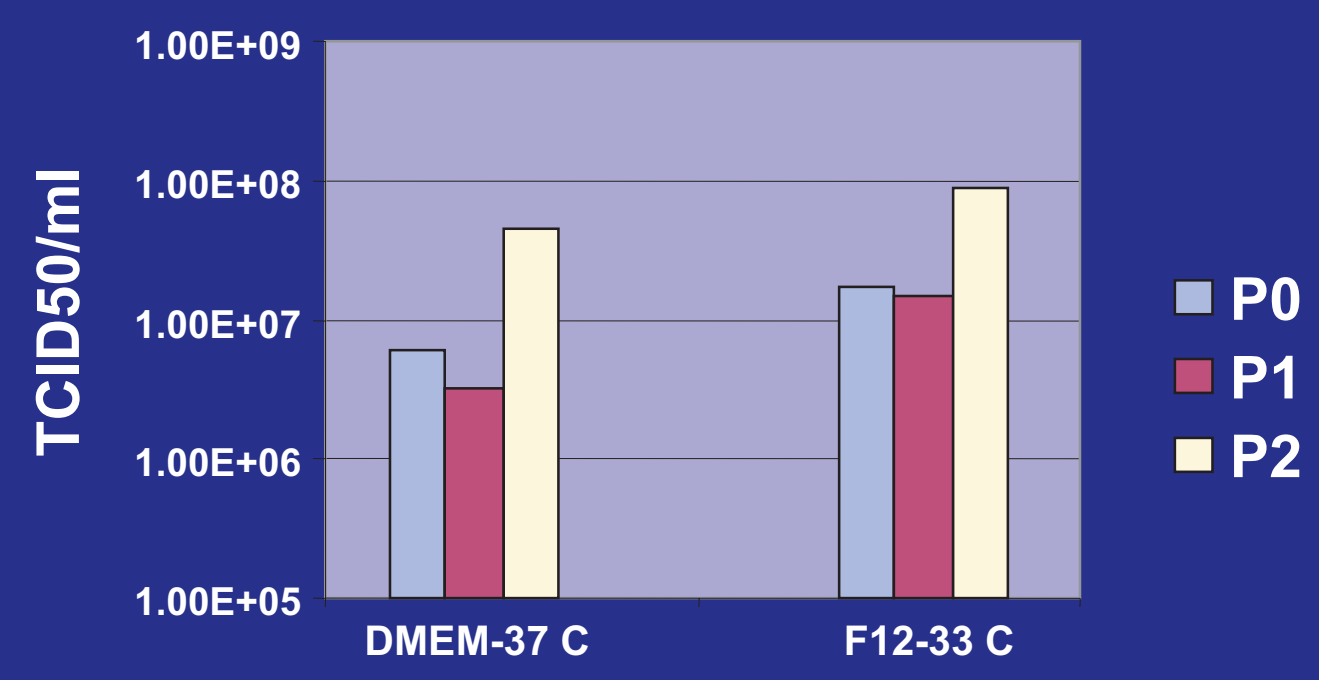
A chimeric RNA virus, PVS-RIPO, was derived from the recombination of human rhinovirus and poliovirus (Sabin). This virus selectively replicates in, and kills, tumor cells of neuronal origin.

We present here the process development for the production of this novel viral vector for the treatment of brain tumors. Some of the problems and solutions are also discussed.

Plasmid PVS-RIPO DNA Starting Material



Comparison of PVS-RIPO Production Process



Conditions

Compared to the old production process (DMEM-37°C), the new process (F12-33°C) developed at the BDP, using serum-free medium, improved the overall virus yields significantly. We can now produce enough PVS-RIPO virus in just two rounds of virus infection (P1 and P2) in Vero cells. This limitation was required by the FDA due to the high mutation rates of this virus.

Production Process Flow Chart

Fermentation and Purification of DNA

Produce PVS-RIPO RNA through *in vitro* Transcription

Generation of Virus through Electroporation (P0)

Production of PVS-RIPO Viral Bank (MVB/WVB) (P1)

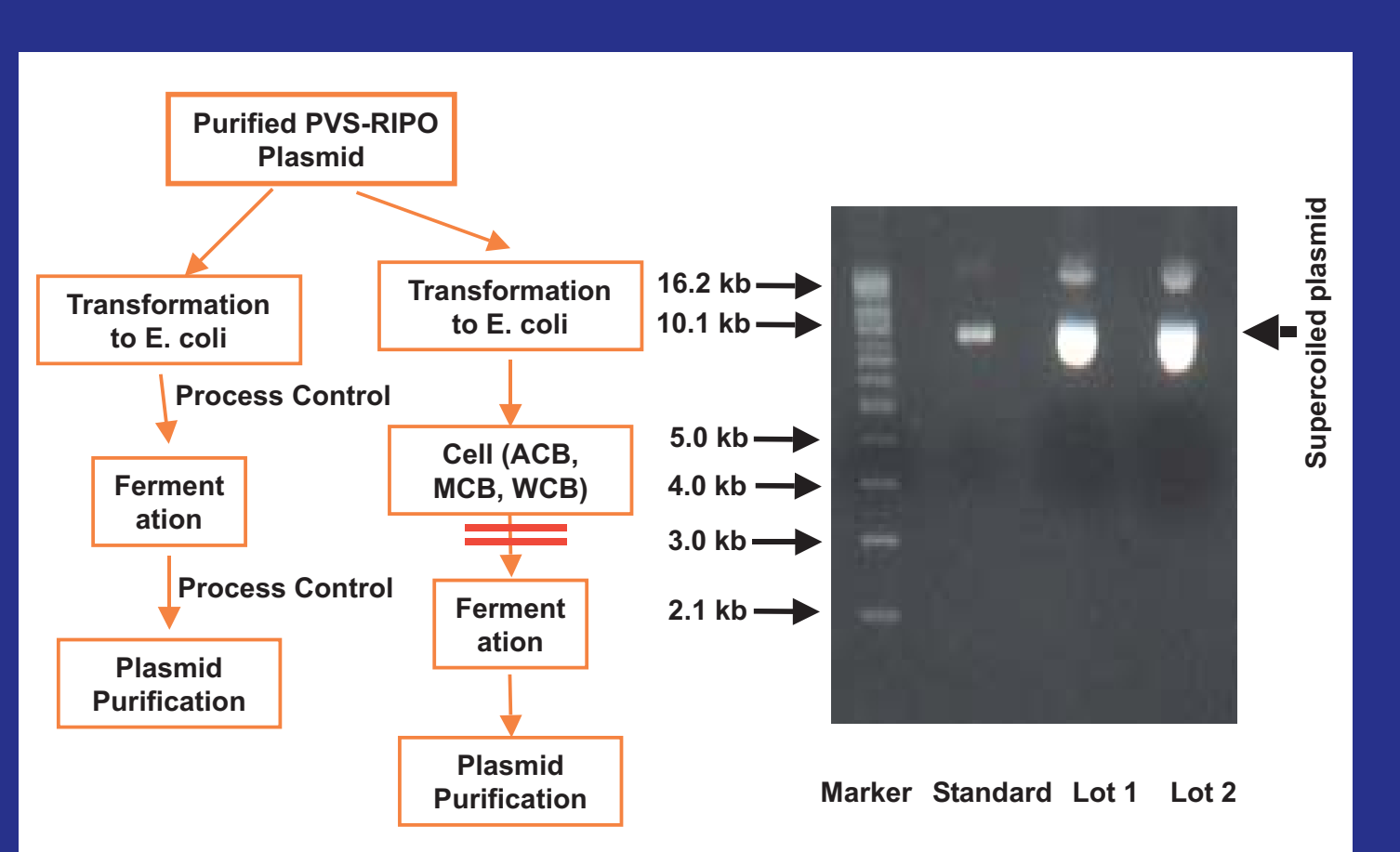
Production of PVS-RIPO Virus Harvest (P2)

Production of PVS-RIPO Bulk

Fill and Finishing

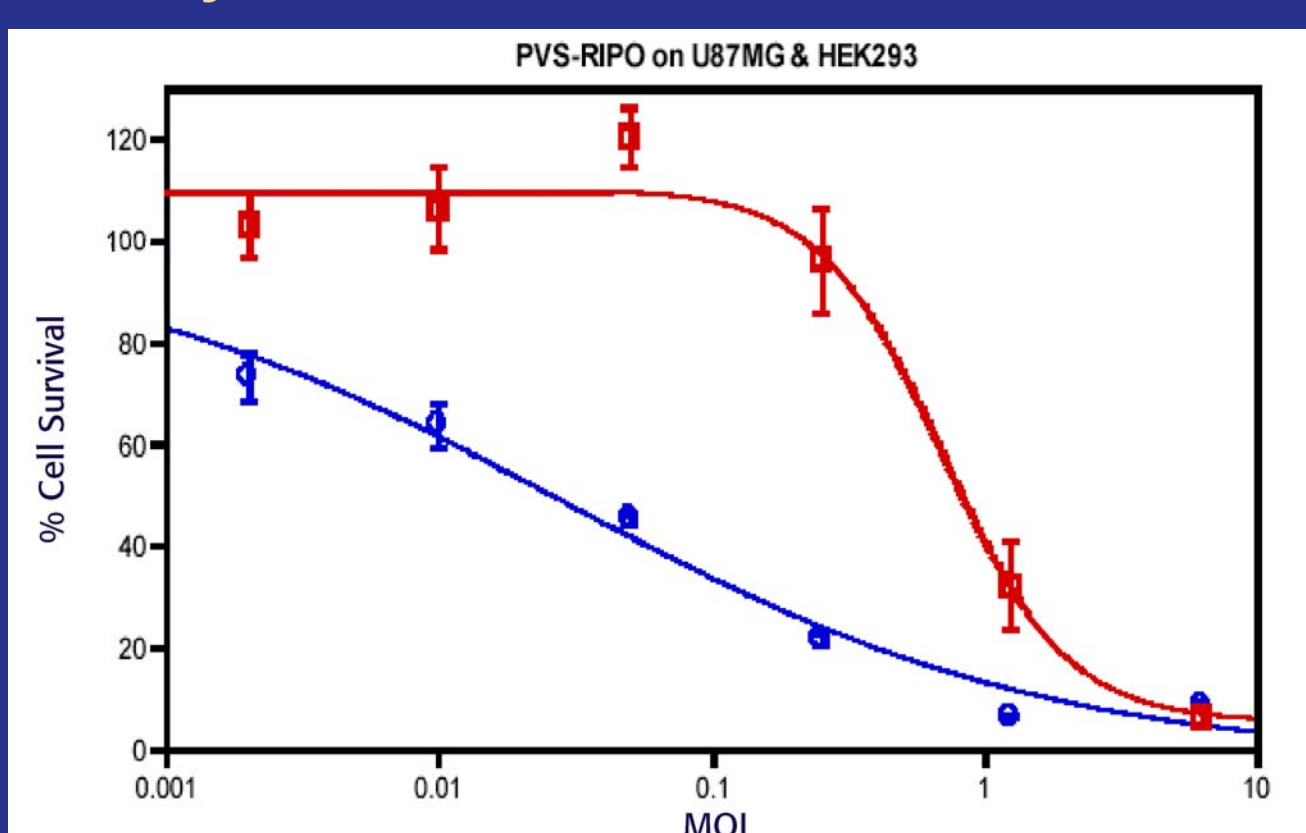
- Other projects that experienced similar issues:
 - D2A RGD RGA+ altered tropism
 - rPA recombination of SPO gene from environmental anthrax

Plasmid PVS-RIPO DNA Production and Final Product



Due to its instability, PVS-RIPO plasmid DNA was purified from fermentation cultures immediately after transformation other than through the cell banking system. Correct plasmid DNA products were reliably obtained by this process.

PVS-RIPO Virus Infection in Astrocytoma Cells vs. Control Cells



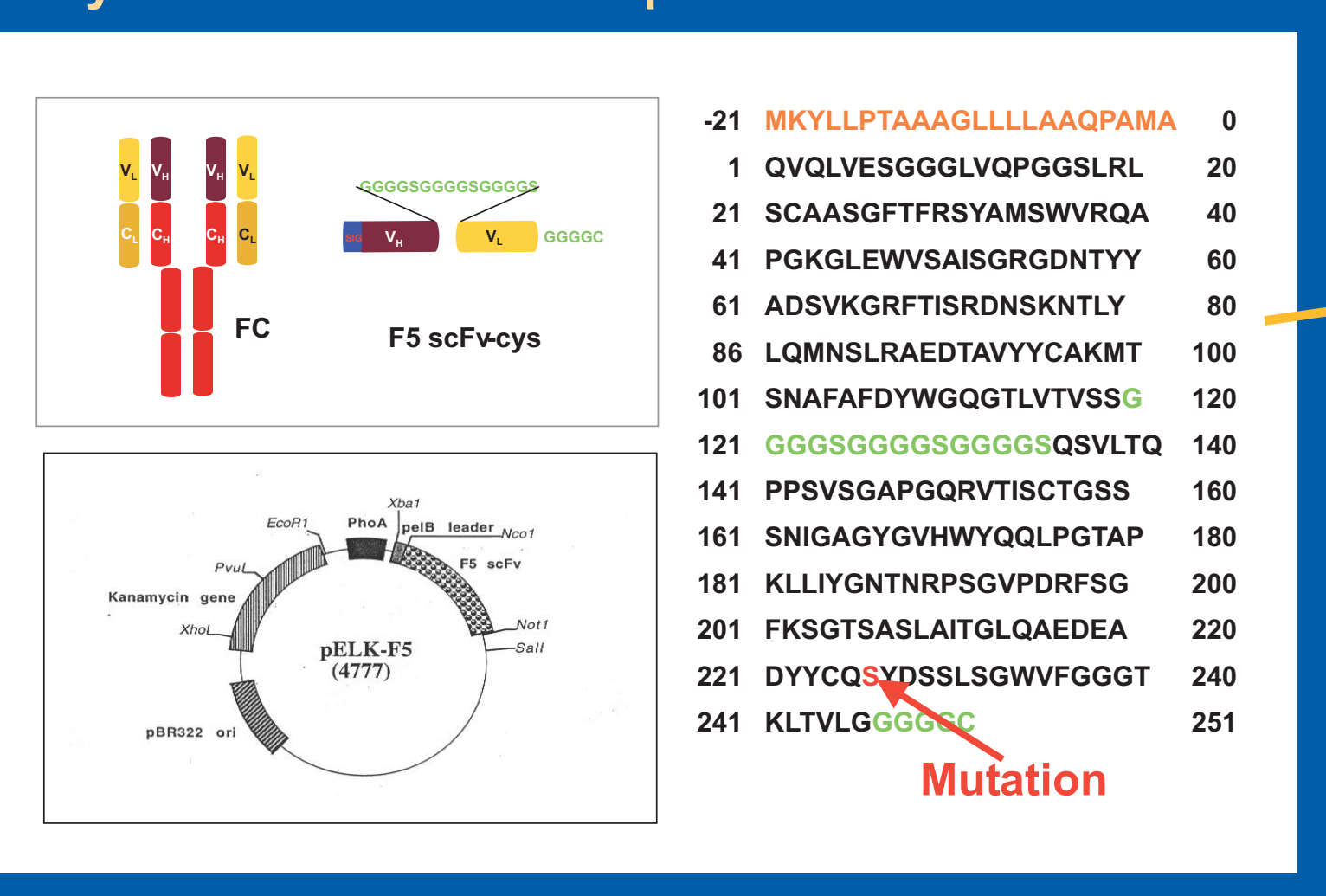
Astrocytoma cells (U87MG) and control cells (HEK293) were seeded in 96-well plates. After infection with PVS-RIPO virus at different concentrations, cell death was measured after addition of MTS dye reagent. U87MG cells were highly sensitive to PVS-RIPO infection, while HEK293 cells were relatively resistant to PVS-RIPO virus.

Conclusions

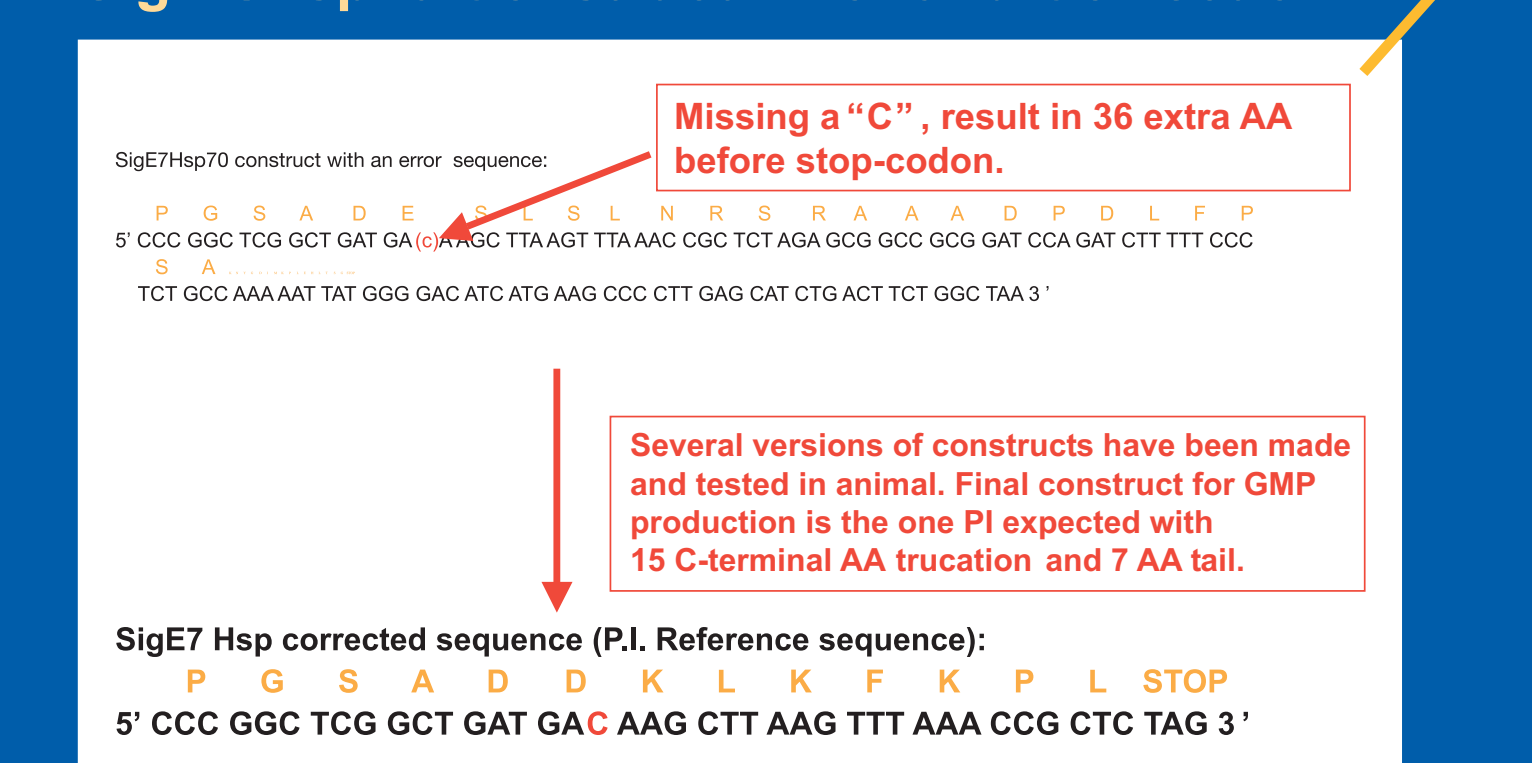
1. Plasmid harboring PVS-RIPO genome is not stable. However, a process was developed to amplify and purify the plasmid DNA.
2. A production process for PVS-RIPO viral vector consisting of steps of IVT, transduction, infection and purification was developed.
3. Viral deliverables can be achieved in two rounds of viral infection in Vero cells, thereby minimizing the safety concerns about this product due to its high mutation rates.
4. Molecular biology and biological assays indicated that the PVS-RIPO virus produced from this process had the expected sequence and selectively infected and killed brain tumor cells.

Sequence Errors: Plasmid Construction and DNA Sequence Problems

F5 cys Anti Erb B2 scFv Expression Construct

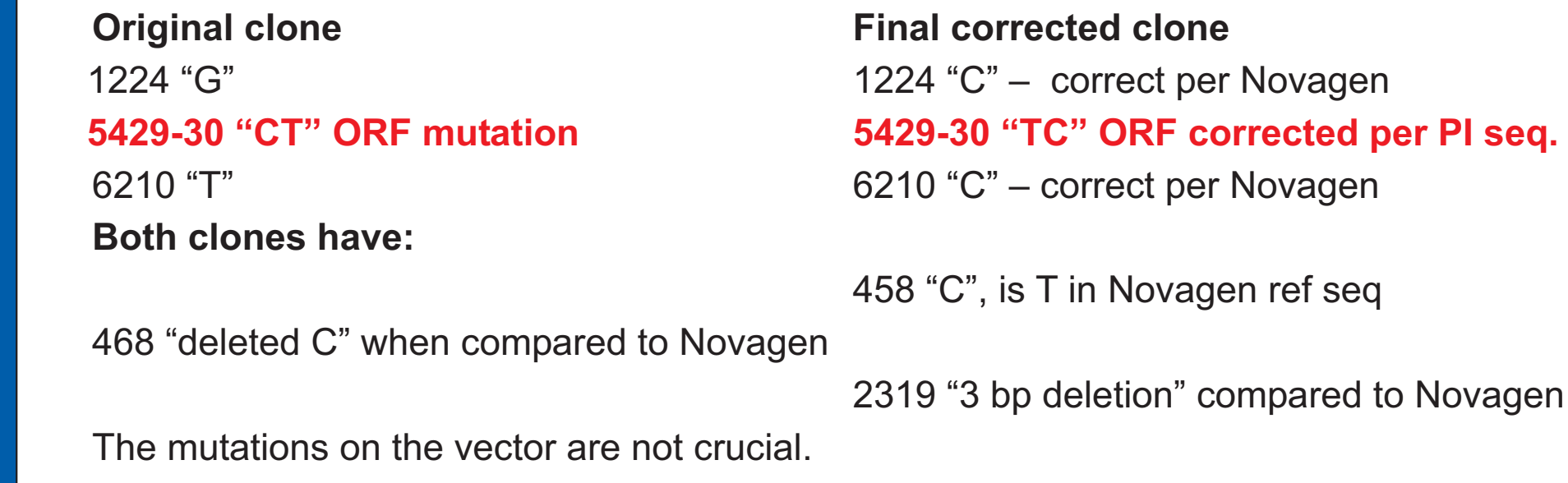


SigE7/Hsp70 Construct Error and Correction



Mutation in Asparaginase Expression Construct and Correction

There was a single-base mutation and this resulted in an amino acid residue change from Proline to Serine in the expressed protein.



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